

CITY OF EL PASO
ACCIDENT WITH PAY LEAVE SUMMARY SHEET

Employee Name (Last, First, MI)

Department

Date of Injury

To qualify for Accident with Pay Leave, an employee:

1. Must be a permanent, full-time employee.
2. Must have sustained a compensable, job-related injury or occupational disease.
3. Must have reported the injury/illness to his immediate supervisor within 24 hours of its occurrence.
4. Must not have been injured as a result of breaking any rules, regulations or laws, including any safety rules adopted by the City or department-mandated safety procedures.
5. Must not have been injured as a result of the gross negligence of the employee.

AWP leave ceases under any one of these conditions:

1. When the employee is released to return to work by his/her treating physician or a physician performing an independent medical examination on behalf of the City.
2. When the employee has used thirty days of AWP in a twelve month period.
3. One year from the date of the injury or occupational disease.
4. When the employee fails to provide timely physician certificates.
5. When the employee does not submit properly and timely completed AWP leave requests.
6. When the employee refuses to submit to any independent medical examination.
7. When the employee fails to act in a manner that is conducive to or consistent with being off work convalescing from a job-related injury.

If AWP leave is approved:

I understand that AWP leave does not cover the initial seven days of lost time. I may elect to use my accrued sick or annual leave during the initial seven days of disability. I understand that the AWP supplement is the difference between my weekly Worker's Compensation benefit and my pre-injury take home pay. I understand that the total amount of money that I receive from Worker's Compensation and the AWP supplement shall not exceed my pre-injury take home pay.

I understand that in the event of any overpayment of Worker's Compensation or AWP supplement payments, the City may deduct the overpayment from future paychecks or reduce any accrued leave balances. If I separate from employment while an overpayment exists, the City may deduct the total overpayment from my final check.

If AWP leave is denied:

I understand that I may appeal to the Human Resources Director within five (5) calendar days of notification of denial. I further understand that if I am not satisfied with the Human Resources Director's decision, I may appeal within ten (10) calendar days of notification of such decision to the Hearing Officer of the Civil Service Commission. I understand that final decision rests with the Hearing Officer.

Employee's Signature

Date: